



STATE
OF
GEORGIA

Application for RECORDS DISPOSITION STANDARD

OFFICE OF SECRETARY OF STATE
DEPARTMENT OF ARCHIVES & HISTORY
RECORDS MANAGEMENT DIVISION

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1. Application Date 12-18-72	INSTRUCTIONS: See separate instructions for completion of front and reverse of this form. Sign original and two copies and forward to Department of Archives and History, Attention: Records Management Officer.	FOR RECORDS MANAGEMENT DIVISION USE	
2. Agency Application No. DHR-V-5		Date Received JAN 12 '73	Date Completed JAN 17 '73
3. AGENCY, Division, Subdivision & Administering Office Address Department of Human Resources Vocational Rehabilitation Business Enterprise Unit - Rom 634S 47 Trinty Avenue Atlanta, Georgia		4. Person to Contact Mr. Leon Hall	5. Working Title Supervisor
		6. Tel. No. 656-2635	

7. ACTION REQUESTED

- ☒ ESTABLISH DISPOSITION STANDARD;
RECORD WILL CONTINUE TO ACCUMULATE. ☐ DISPOSE OF PRESENT ACCUMULATION;
NO FURTHER ACCUMULATION ANTICIPATED.

8. Earliest & Latest
Dates of Series
1944-present

9. Exact Series Title
Blind Vending Stand Equipment File

10. What is the function of the office in which this record series is created?
This office is responsible for establishment, evaluation and supervision of business enterprise for the blind and severely handicapped of the state. This includes providing business opportunity for the blind and severely handicapped by evaluation of business locations, providing opportunity for a vending stand, purchase of equipment and merchandise, providing continuous supervision of the severely handicapped employees until the vending stand is closed permanently.

11. This file contains the following documents (include form numbers and titles, if any, and file arrangement).

Documents relating to but not limited to: equipment purchased, initial invoice of merchandise purchased, correspondence relating to the negotiation for site location of stand.
Sampled attached - stand #64 (closed stand)

ATTACH SAMPLES OF THE FILE

12. EQUIPMENT OCCUPIED	No. of Drawers	Cu. Ft. of Records	ANNUAL RATE OF ACCUMULATION	No. of Drawers	Cu. Ft. of Records
Letter-size File Drawers	5	7 1/2		1	1 1/2
Legal-size File Drawers			Floor Space Occupied (Square Feet)	In Office(s)	In Storage Area(s)
				This Year's	Last Year's
			AVERAGE DAILY REFERENCES	Preceding Year's	All Prior Years
				5	1
				1	0

QUESTIONNAIRE Place an "x" in the proper column. If answer is "YES," please explain

YES NO

13. Is this the Record Copy of the series? ☒ [X] ☐ []
14. Is there a duplication of this series in another office or agency? ☐ [] ☒ [X]
15. Is the information contained in this series ever summarized or published?
Attach copy of summary or publication. ☐ [] ☒ [X]
16. Does the series contain classified information requiring security handling? ☐ [] ☒ [X]
17. Does the series initiate, amend or terminate agency policies and procedures? ☐ [] ☒ [X]
18. Could the function be performed if the files were lost or destroyed? ☒ [X] ☐ []
- If necessary
19. Is the series (or major portion of it) regularly microfilmed? If yes, why? ☐ [] ☒ [X]
20. Does the record series provide data as input to an EDP file? ☐ [] ☒ [X]
21. Does the record series contain documentation produced as EDP printout? ☐ [] ☒ [X]
22. Has the Federal Government issued instructions governing the retention/disposition of these files? ☐ [] ☒ [X] *HAVE NOT LOCATED ANY RULES PERTAINING TO RETENTION OF THESE RECORDS*
23. Will there be a need for these records 10, 15 years from now? If yes, what? ☐ [] ☒ [X]

24. REQUIREMENTS. The following requires the files to be kept 5 years:

a. ☐ [] STATE LAW b. ☐ [] STATUTE OF LIMITATION c. ☐ [] AUDIT PERIOD d. ☐ [] FEDERAL LAW e. ☒ [X] ADMINISTRATIVE DECISION f. ☐ [] HISTORICAL VALUE

(Cite Law, Statute, or other reason for the retention requirement)

Mr. Leon Hall--Justification of Expenditures under Federal Grants

25. AGENCY RECOMMENDATIONS. This agency recommends that the file series be cut off at the end of each - ☐ [] CALENDAR YEAR - ☐ [] FISCAL YEAR - ☒ [X] OTHER upon closure of vending stand, then:

- ☒ [X] Hold in the current files area 1 month(s)/ 1 year(s):
- ☒ [X] Transfer to ☒ [X] State Records Center ☐ [] Local Holding Area; hold 4 year(s):
- ☒ [X] Destroy.
- ☐ [] Transfer to State Archives for permanent retention.
- ☐ [] Destroy immediately after cut-off.
- ☐ [] Other: (Specify)

(Indicate briefly rationale for recommendations above/or write additional remarks):

Records Management Officer (Signature)	Date	OTHER REQUIRED SIGNATURES	DATE
<i>Douglas M. Hall</i>	<i>1-5-72</i>		
26. Recommendations in paragraph 25 are:	Agency Head/Designee <input checked="" type="checkbox"/> [X] Approved <input type="checkbox"/> [] Disapproved	<i>Leon E. Hall</i>	<i>1-3-72</i>
	State Auditor/Designee <input checked="" type="checkbox"/> [X] Approved <input type="checkbox"/> [] Disapproved	<i>William M. Aja</i>	<i>1-15-73</i>
	Secretary of State/Designee <input checked="" type="checkbox"/> [X] Approved <input type="checkbox"/> [] Disapproved	<i>Carroll Hart</i>	<i>1-11-73</i>
	Attorney General/Designee <input checked="" type="checkbox"/> [X] Approved <input type="checkbox"/> [] Disapproved	<i>Robert H. Sherr</i>	<i>1-15-73</i>

STATE RECORDS
COMMITTEE